

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H87826

FILED
Apr 17, 2006
Secretary of State

Entity Name: CONCEPT CONTRACTORS, INC.

Current Principal Place of Business:

920 N.E. INDUSTRIAL BLVD.
P.O. BOX 1356
JENSEN BEACH, FL 349575005

New Principal Place of Business:

16600 NW CHIPOLA HEIGHTS RD
ALTHA, FL 32421

Current Mailing Address:

920 N.E. INDUSTRIAL BLVD.
P.O. BOX 1356
JENSEN BEACH, FL 349575005

New Mailing Address:

PO BOX 271
CLARKSVILLE, FL 32430

FEI Number: 65-0048323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIOFFI, P. MICHAEL
3447 NE MELBA DR
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

CIOFFI, P. MICHAEL
16600 NW CHIPOLA HEIGHTS RD
ALTHA, FL 32421 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/17/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CIOFFI, P. MICHAEL,
Address: 3447 NE MELBA DR
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CIOFFI, P. MICHAEL,
Address: 16600 NW CHIPOLA HEIGHTS RD
City-St-Zip: ALTHA, FL 32421

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER M CIOFFI

D

04/17/2006

Electronic Signature of Signing Officer or Director

Date